UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

03500.013704.1 Attomey Docket No.

First Named Inventor or Application Identifier

SHINJI FUKUNAGA

Express Mail Label No.

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ESS TO:	Commissi P.O. Box	Patent Application oner for Patents 1450 a, VA 22313-1450
1. Fee Transmittal Form (Submit an original, and a duplicate for fee p	rocessing)	7.	CD-ROM or CD- Program (Apper	-R in duplicate	, large table or Computer
2. Applicant claims small entity status. See 37 CFR 1.27.	· · ·		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. X Specification Total Pa	ges 202		a. Comp	outer Readable	e Form (CRF)
4. X Drawing(s) (35 USC 113) Total Sh	X Drawing(s) (35 USC 113) Total Sheets 50		b. Specification Sequence Listing on:i. CD-ROM or CD-R (2 copies); or		
5. X Oath or Declaration Total Pa	nges 2		ii. pape		(2 30), 30
a. Newly executed (original or o	a. Newly executed (original or copy)		c. Statements verifying identity of above copies		
b. Copy from a prior application (37 CFR 1.63(d))			ACCOMPANYING APPLICATION PARTS		
(for continuation/divisional with Box 17 completed)			Assignment Pape	ers (cover sheet	& document(s))
i. DELETION OF INVENTOR(S) Signed Statement attached deleting			37 CFR 3.73(b) S (when there is a		Power of Attorney
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			English Transla	tion Documen	t (if applicable)
6. X Application Data Sheet. See 37 CFR 1.76			Information Disc Statement (IDS		Copies of IDS Citations
		13. X	Preliminary Am	endment	
		14. X	Return Receipt (Should be spec		
			Certified Copy of		ument(s)
					
17. If a CONTINUING APPLICATION, check ap	propriate box and su	upply the requisite	information:		
Continuation Prior application information: X Divisional Examiner		uation-in-part (CIP	of prior applicati Group/Art Unit: _		33,826
For CONTINUATION OR DIVISIONAL APPS only: T considered a part of the disclosure of the accompany be relied upon when a portion has been inadvertently	ing continuation or div	isional application a	and is hereby incorp		* *
	18. CORRES	SPONDENCE ADD	RESS		
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below					
NAME					
Address					
City	State		Zip	Code	
Country	Telephone		Fa	x	

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	27-20 =	7	X \$ 18.00 =	\$126.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 86.00 =	\$0.00
	MULTIPLE DEPENDENT	CLAIMS (if applicable) (37	CFR 1.16(d))	\$290.00 =	\$0.00
_i				BASIC FEE (37 CFR 1.16(a))	
· · · · · · · · · · · · · · · · · · ·			Total of	above Calculations =	\$896.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL =	\$806.00
9. Sn a.		ntity statement is enclose			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	Lock See Yu-Jahnes (Reg. No. 38,667)				
SIGNATURE	Job See In the				
DATE	March 16, 2004				

Form #125

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